



Funding opportunities in cancer: a case of success

Prof. Jesus Garcia-Foncillas MD PhD

Disclosures

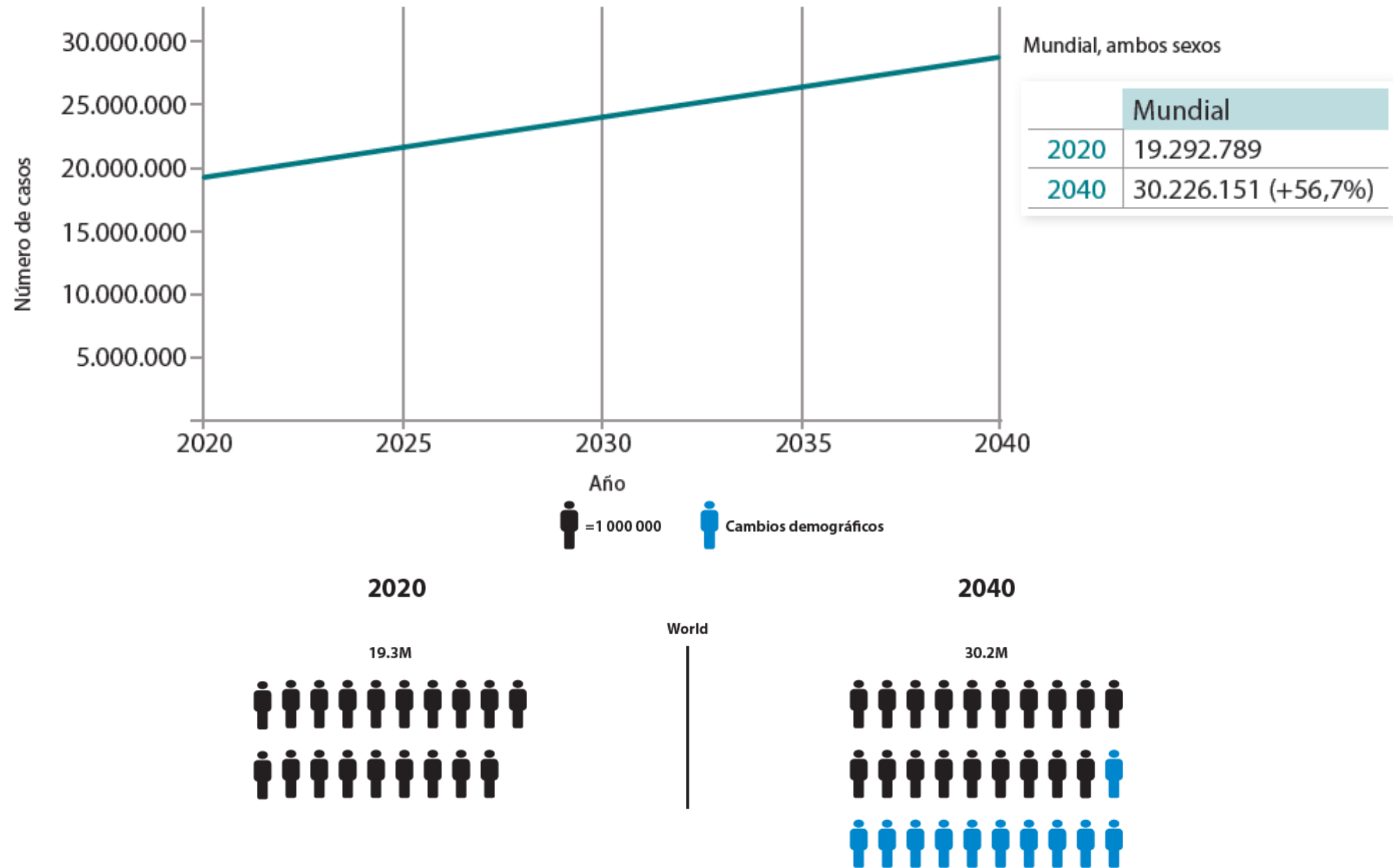
- Honoraria: Advisory boards and/or speaker fees and/or research projects:
 - ABBY
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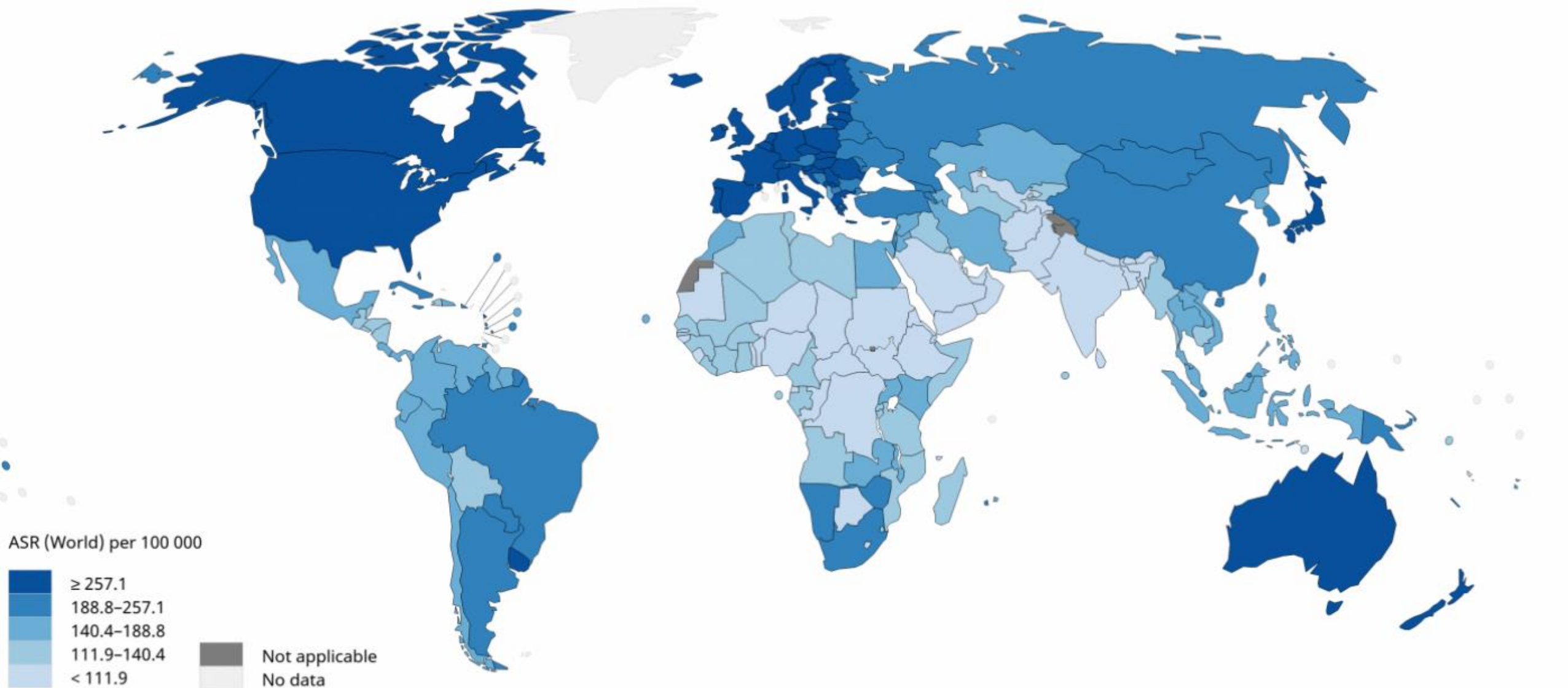
A decorative graphic on the left side of the slide, consisting of a network of grey dots connected by thin grey lines, resembling a molecular structure or a data network.

Dimension of the problem

World cancer incidence



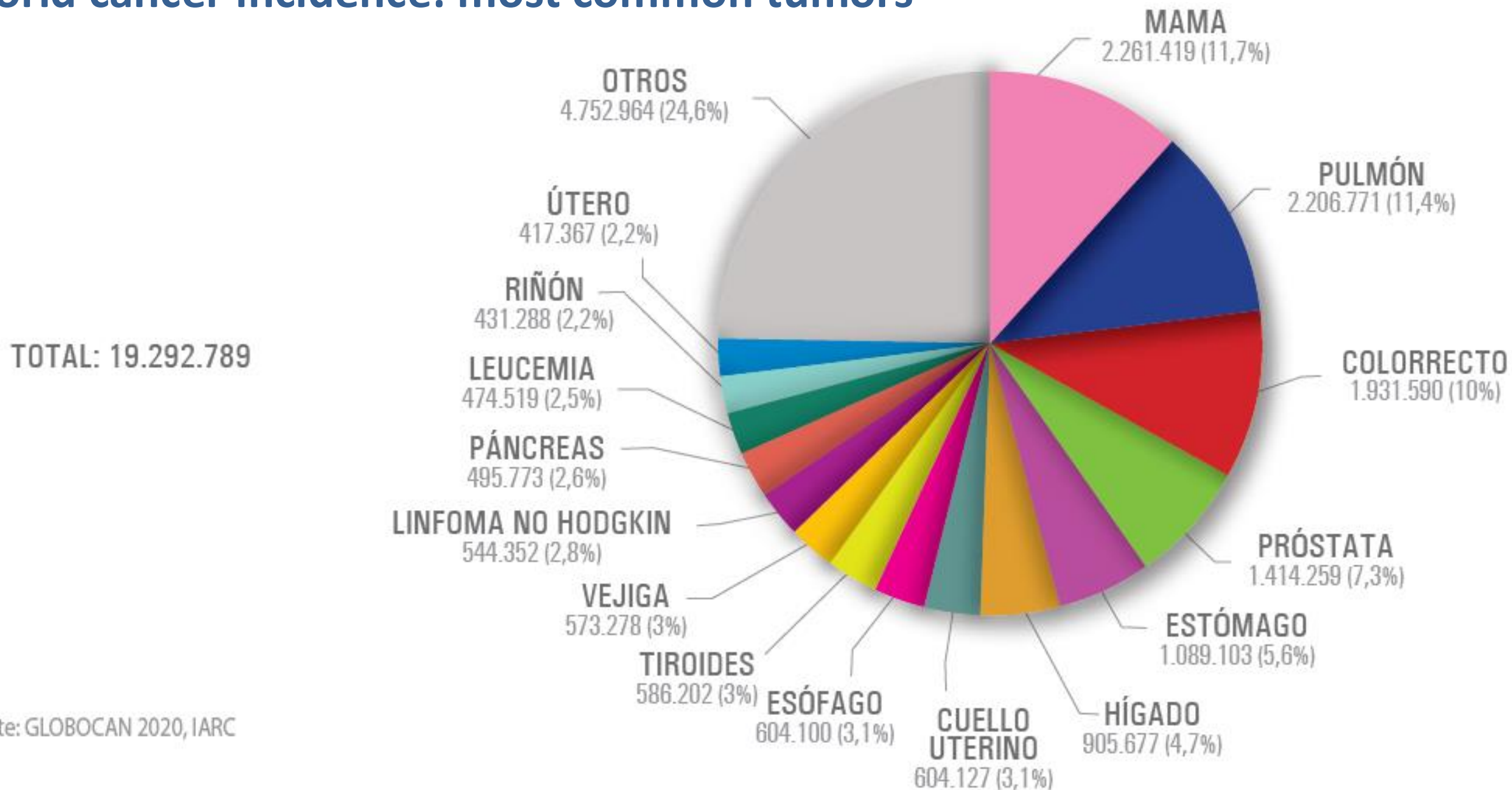
Estimated age-standardized incidence rates (World) in 2020, all cancers, both sexes, all ages



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Data source: GLOBOCAN 2020
Graph production: IARC
(<http://gco.iarc.fr/today>)
World Health Organization

World cancer incidence: most common tumors



Fuente: GLOBOCAN 2020, IARC

Cancer Incidence in EU

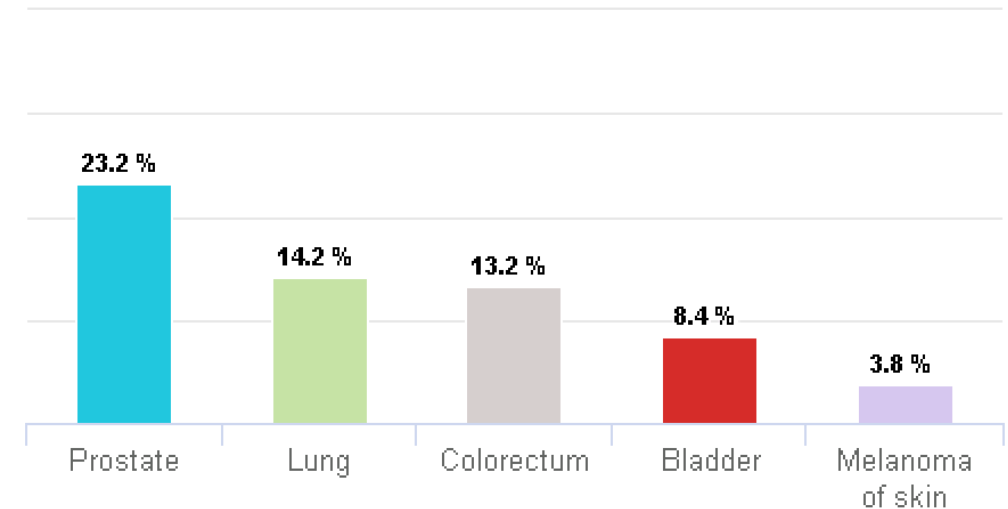
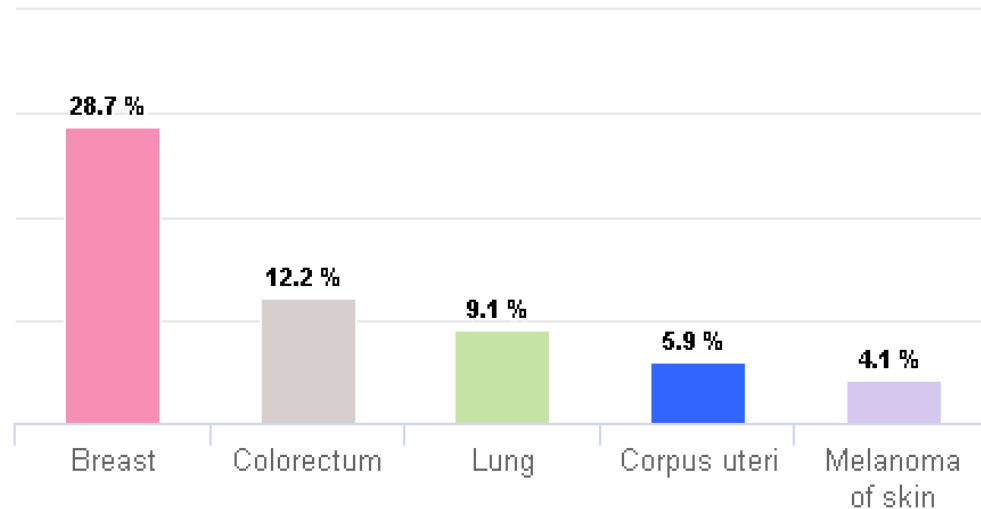


1 237 588 new cases

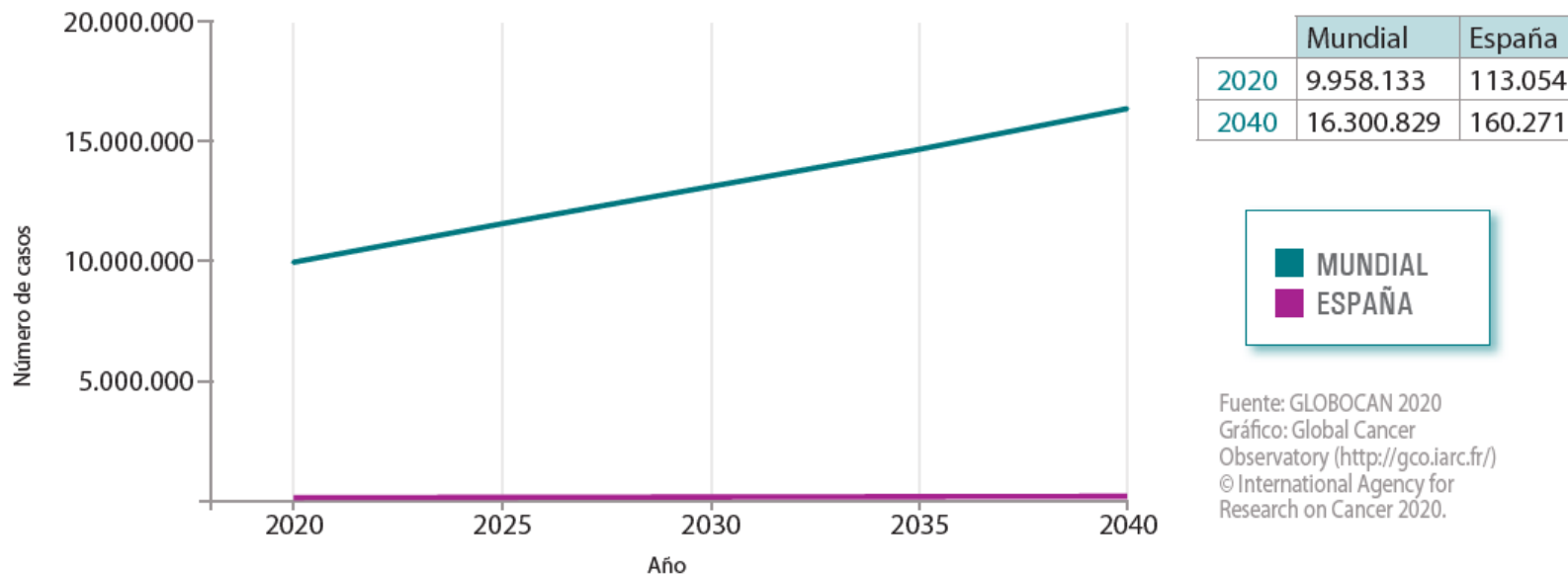


1 444 949 new cases

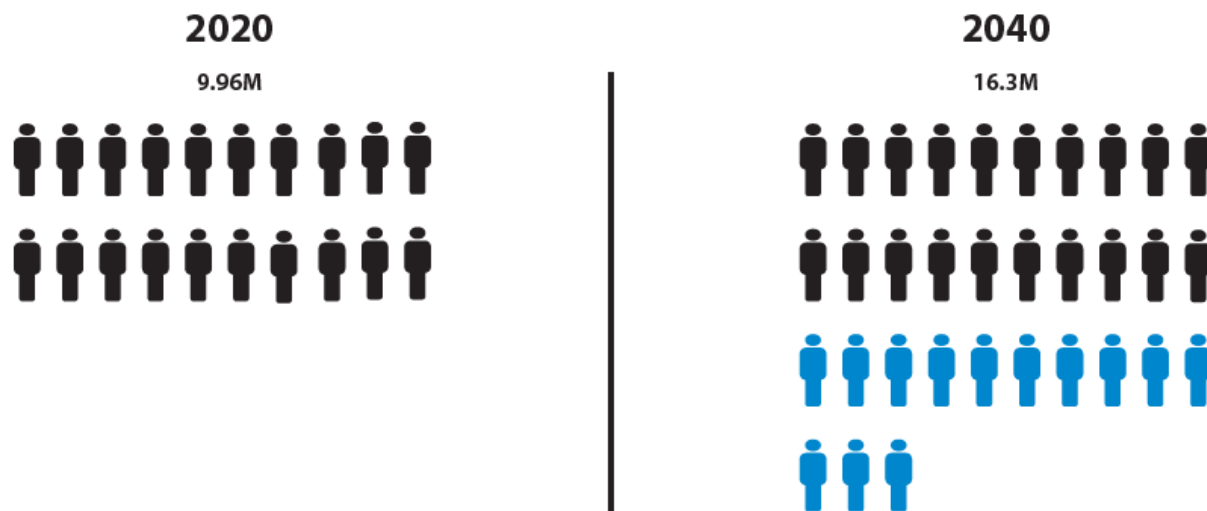
Most common cancers



Mortality rate: worldwide & Spain



● = 500 000 ● Cambios demográficos



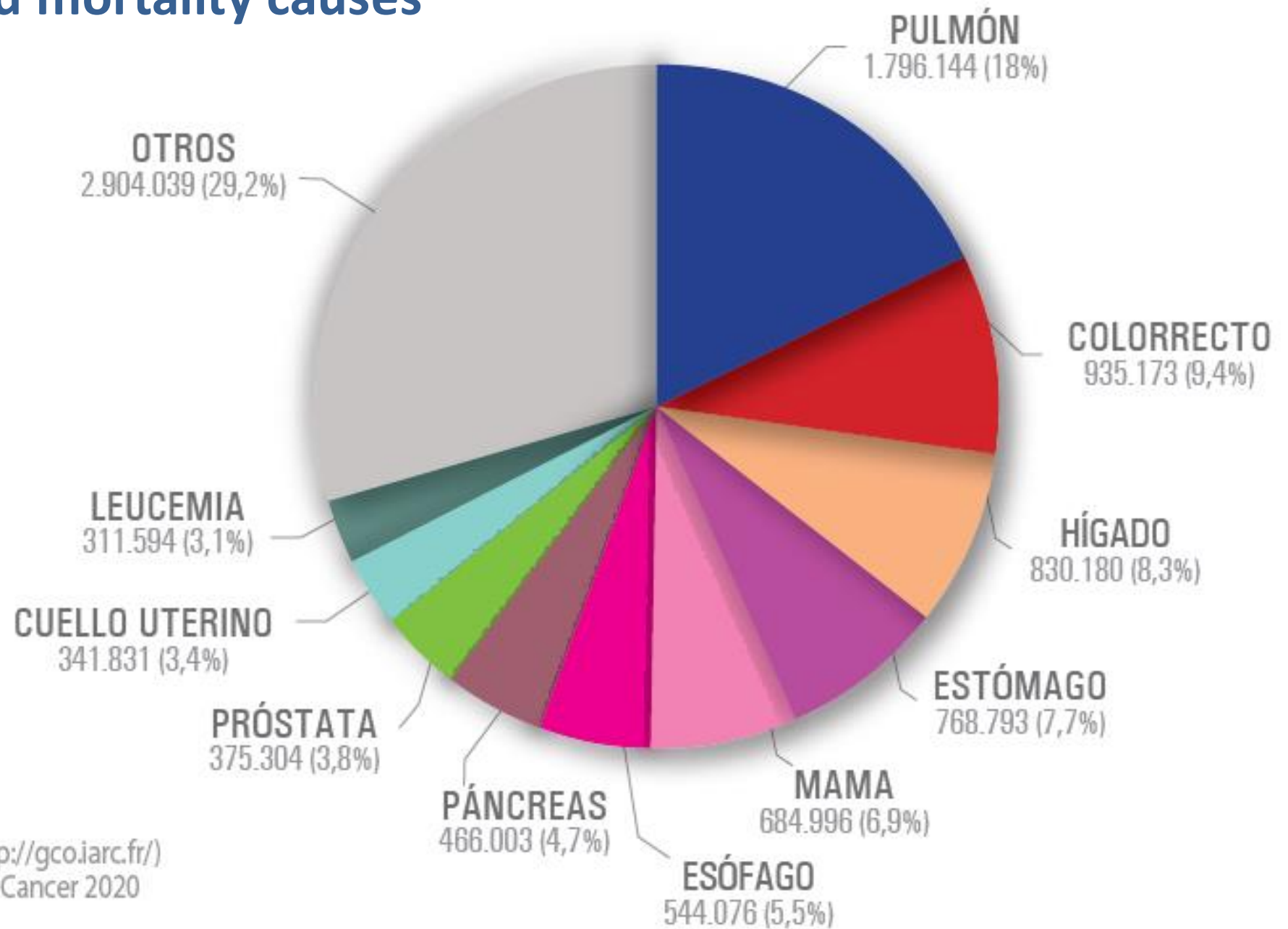
Covid-19 in Spain

13,4 millions of cases

114.000 deaths

World mortality causes

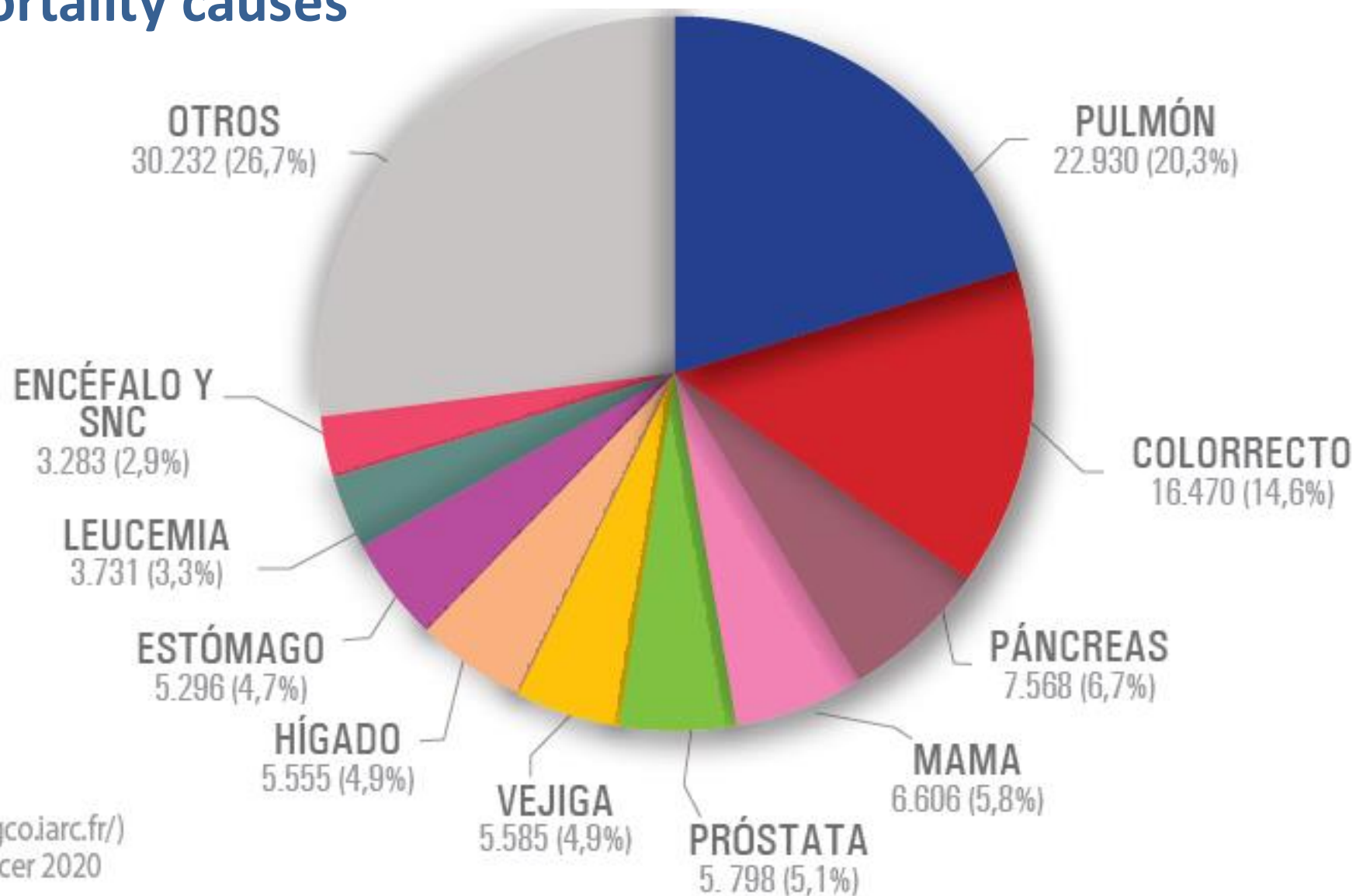
TOTAL: 9.958.133



Fuente: GLOBOCAN 2020
Gráfico: Global Cancer Observatory (<http://gco.iarc.fr/>)
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Spain mortality causes

TOTAL: 113.054

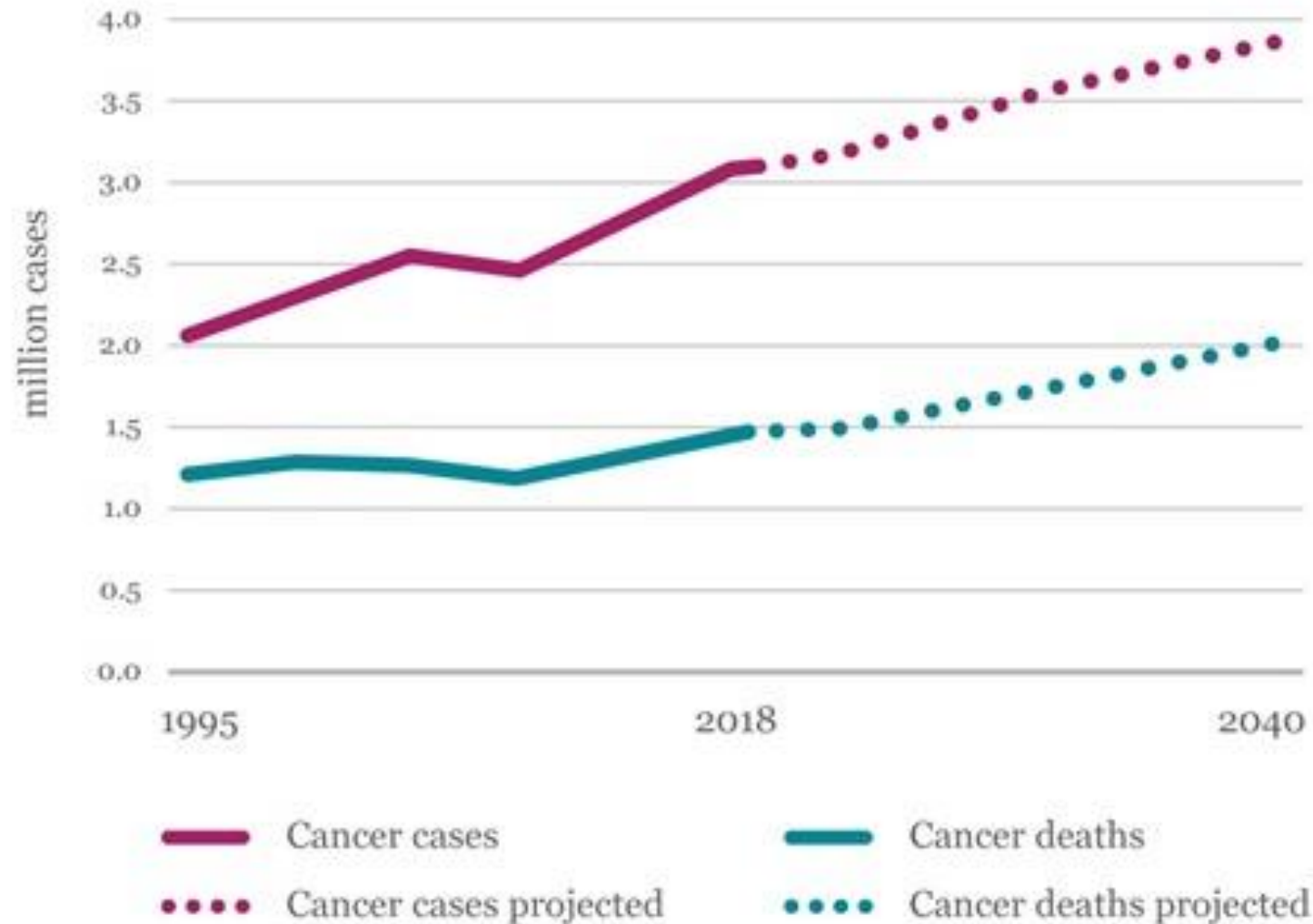


Fuente: GLOBOCAN 2020

Gráfico: Global Cancer Observatory (<http://gco.iarc.fr/>)

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THE NUMBER OF CANCER DEATHS IN EUROPE IS INCREASING AT A SLOWER PACE THAN THE NUMBER OF CANCER DIAGNOSES





Searching answers

Ensuring equal access to cancer care across Europe

- The challenge
- Policy addressing
- Response from the European cancer community

Ensuring equal access to cancer care across Europe

- **The challenge**
- Policy addressing
- Response from the European cancer community

Wide cancer inequalities across European countries

40%

Cancer survival rate in Western Europe is up to 40% higher than in Eastern Europe (depending on the type of cancer)¹

32%

CEE has 32% higher relative cancer mortality than Western Europe²

18%

In one year, over 55,000 (18%) cancer deaths would have been avoided in Eastern Europe by closing the gap³

Ensuring equal access to cancer care across Europe

- The challenge
- **Policy addressing**
- Response from the European cancer community

Europe's Beating Cancer Plan's focus on inequalities

- **'Reducing cancer inequalities'** as a standalone chapter and ambition
- **Ambitious goals** to promote equal access to cancer care:
 - Tobacco-Free Generation
 - 90% eligible citizens accessing to cancer screening
 - 90% eligible patients accessing Comprehensive Cancer Centres



Why an EU Cancer Plan?

- Cancer is the primary cause of death for Europeans under 65.
- Every year around 2.7 million people living in the EU are diagnosed with cancer.
- The lives lost to cancer in the EU are set to increase by more than 24% by 2035.
- But 40 % of cancers can be prevented.



EUROPE'S BEATING CANCER PLAN

LET'S STRIVE FOR MORE

Mission letter Stella Kyriakides, Commissioner for Health and Food Safety

- to put forward a 'Europe is Beating Cancer Plan'
- actions to strengthen our approach at every key stage of the disease:

Prevention

Diagnosis

Treatment

**Survivorship,
palliative care**

What is the EU Cancer Plan?

Europe's Beating Cancer Plan was launched in February 2021 much has already been done towards preventing cancer, supporting equal access and improving the lives of all those who touched by this disease.

4 KEY STRANDS:

(1) prevention; **(2)** early detection; **(3)** diagnosis and treatment; and **(4)** quality of life of cancer patients and survivors.

And

10 FLAGSHIP ACTIONS

10 FLAGSHIP ACTIONS



NEW TECHNOLOGIES, RESEARCH AND INNOVATION

1. European Commission Knowledge Centre on Cancer
✓ Launched June 2021
2. European Cancer Imaging Initiative
✓ Work started on atlas of cancer related images



SAVING LIVES THROUGH SUSTAINABLE CANCER PREVENTION

3. Eliminate cancers caused by Human papillomavirus
✓ Joint Action on HPV vaccination launched, February 2022

10 FLAGSHIP ACTIONS



IMPROVING EARLY DETECTION OF CANCER

4. EU Cancer Screening Scheme

- ✓ Proposal to revise the Council Recommendation on Cancer Screening, published September 2022
- ✓ Scientific opinion of the Group of Chief Scientific Advisers and other contributions, published March 2022
- ✓ Call for evidence published, February 2022

10 FLAGSHIP ACTIONS



ENSURING HIGH STANDARDS IN CANCER CARE

5. EU network of National Comprehensive Cancer Centres

- ✓ Launched December 2021 and grants given to Member States

6. Cancer Diagnostic and Treatment for All

- ✓ Call for proposals launched 2022

7. European Initiative to Understand Cancer

- ✓ Coordination and Support Action, launched 2022



Flagship 5. EU network of Comprehensive Cancer Centres

The goal is to:

- achieve **higher-quality care** and **reduce inequalities** by providing **diagnosis and treatment close to home**;
- ensure that **90% of eligible patients** have access to such centres by 2030.

✓ Joint Action launched November 2022 (JA CraNE)

2023 EU4Health Work Programme call



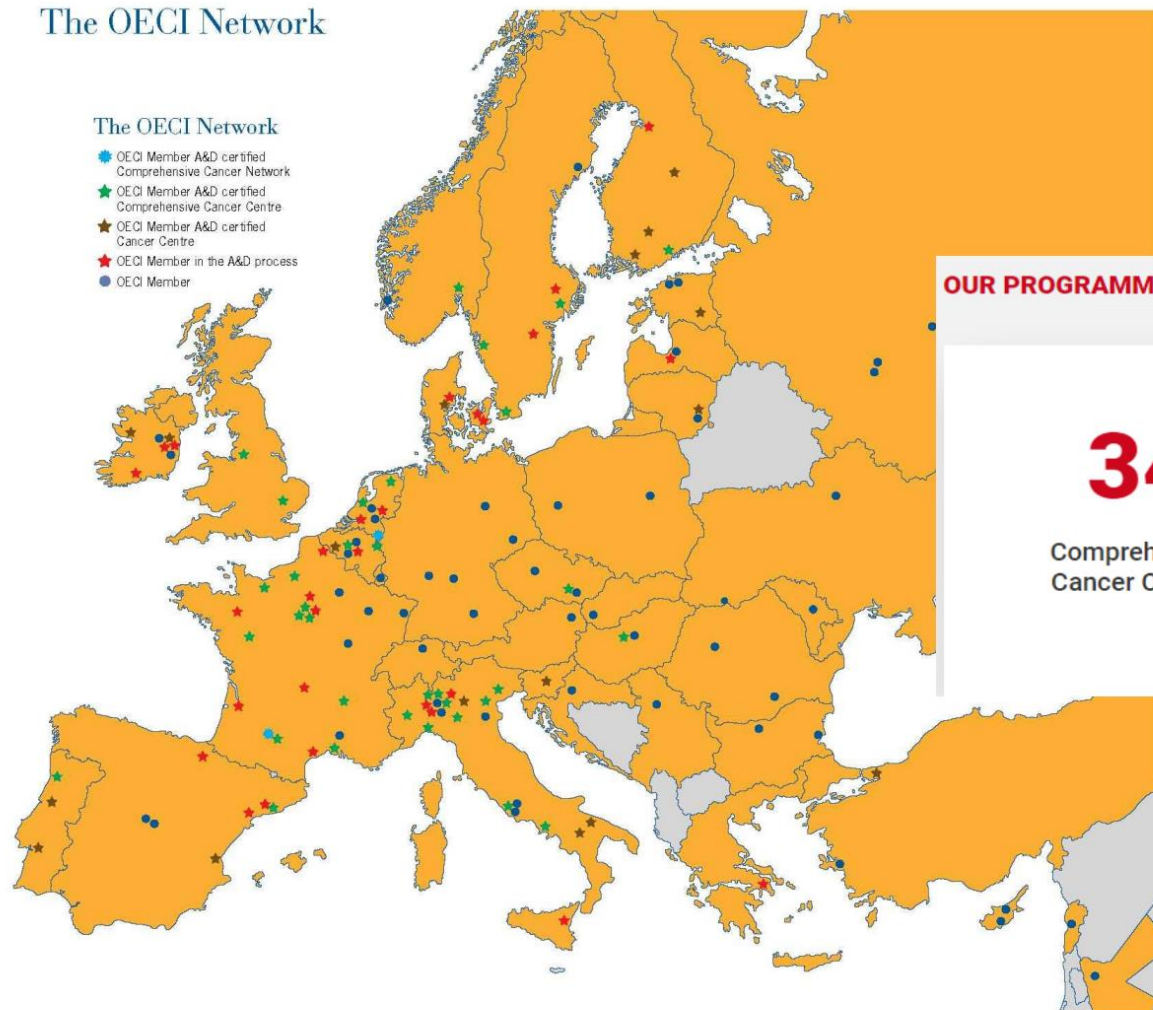
European
Commission



The OEI Network

The OEI Network

- OEI Member A&D certified Comprehensive Cancer Network
- ★ OEI Member A&D certified Comprehensive Cancer Centre
- ★ OEI Member A&D certified Cancer Centre
- ★ OEI Member in the A&D process
- OEI Member



OUR PROGRAMME BY THE NUMBERS

34

Comprehensive
Cancer Centres

19

Cancer Centres

2

Comprehensive
Cancer Networks

26

Centres in
accreditation

= 81

Centres and
Networks in our
programme



10 FLAGSHIP ACTIONS



THE QUALITY OF LIFE FOR CANCER PATIENTS, SURVIVORS, AND CARERS

8. Better life for cancer patients' initiative

- ✓ Report on 'Access to financial services for persons with a history of cancer', including the right to be forgotten, published May 2022
- ✓ Work started on code of conduct

REDUCING CANCER INEQUALITIES ACROSS THE EU

9. European Cancer Inequalities Registry

- ✓ First phase launched February 2022

10 FLAGSHIP ACTIONS



PUTTING CHILDHOOD CANCER UNDER THE SPOTLIGHT

10. Helping Children with Cancer Initiative

- ✓ EU Network of Youth Cancer Survivors, launched February 2022
- ✓ New section on Pediatric Cancers added to the European Cancer Information System

Ensuring equal access to cancer care across Europe

- The challenge
- Policy addressing
- **Response from the European cancer community**

European Cancer Pulse



The European Cancer Pulse will be an **innovative and interactive data visualisation tool tracking inequalities in cancer** and their resolution across Europe

Bringing together data intelligence across:

- **34 EU and non-EU European countries**
- **120 areas of the cancer pathway and cancer policy**
- **20 categories of inequalities** in cancer
- All types of available **data sources**

SELNET

Sarcoma European and Latin American NETwork

Granted by H2020

SELNET: A Network of Sarcoma Centers in LATAM

Granted by H2020

- **Horizon 2020 Call: H2020-SCI-BHC-2018-2020** (Better Health and care, economic growth and sustainable health systems)
- **Topic: SCI-BHC-18-2018** Type of action: **RIA** (Research and Innovation Action) Proposal number: **SEP-210512885**
- **Proposal acronym: SELNET** (Sarcoma European & Latinamerican NETwork)

Seville 21-22 Feb 2019



C de Mexico 19-21 Sep 2019



Lyon 9-10 Jan 2020

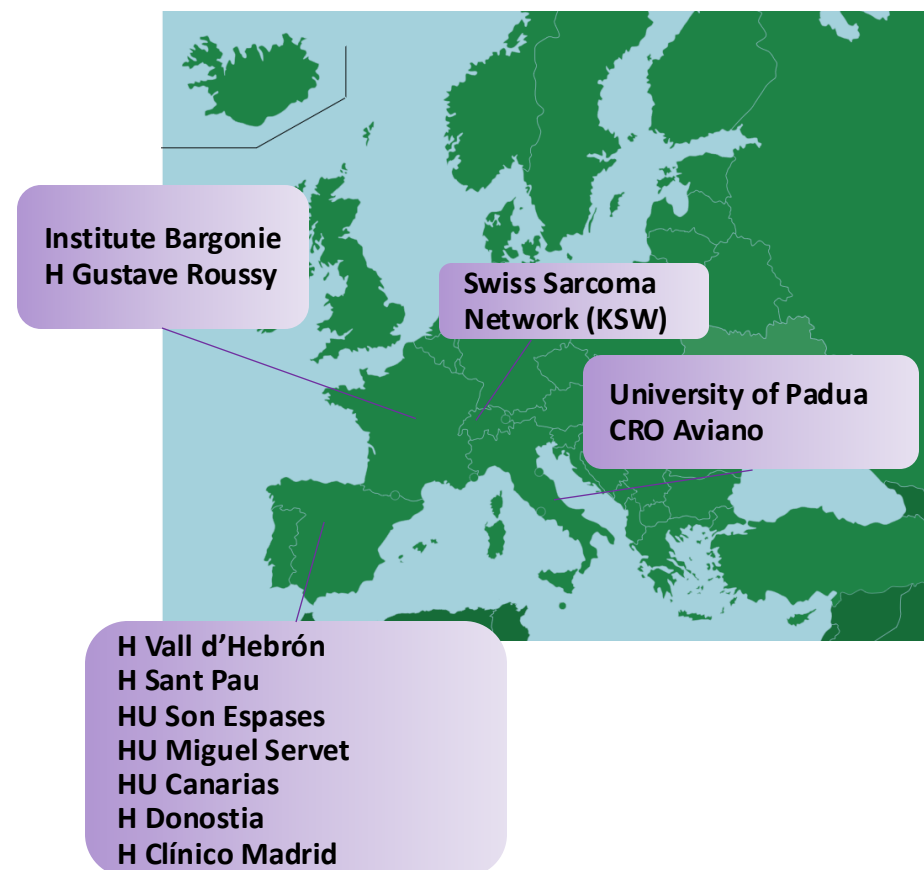


MEMBERS

Institutions: 47 (CDA completed)



Paraguay and Switzerland have joined SELNET!
Panama and US are ongoing!



WP 6 & 7 The main aim: Observational study

D7.4 Report on final results for STS, BS, and GIST cohorts

SELNET

Sarcoma as a model to improve diagnosis and clinical care of rare tumors through a European and Latin American multidisciplinary network

Grant Agreement No. 825806

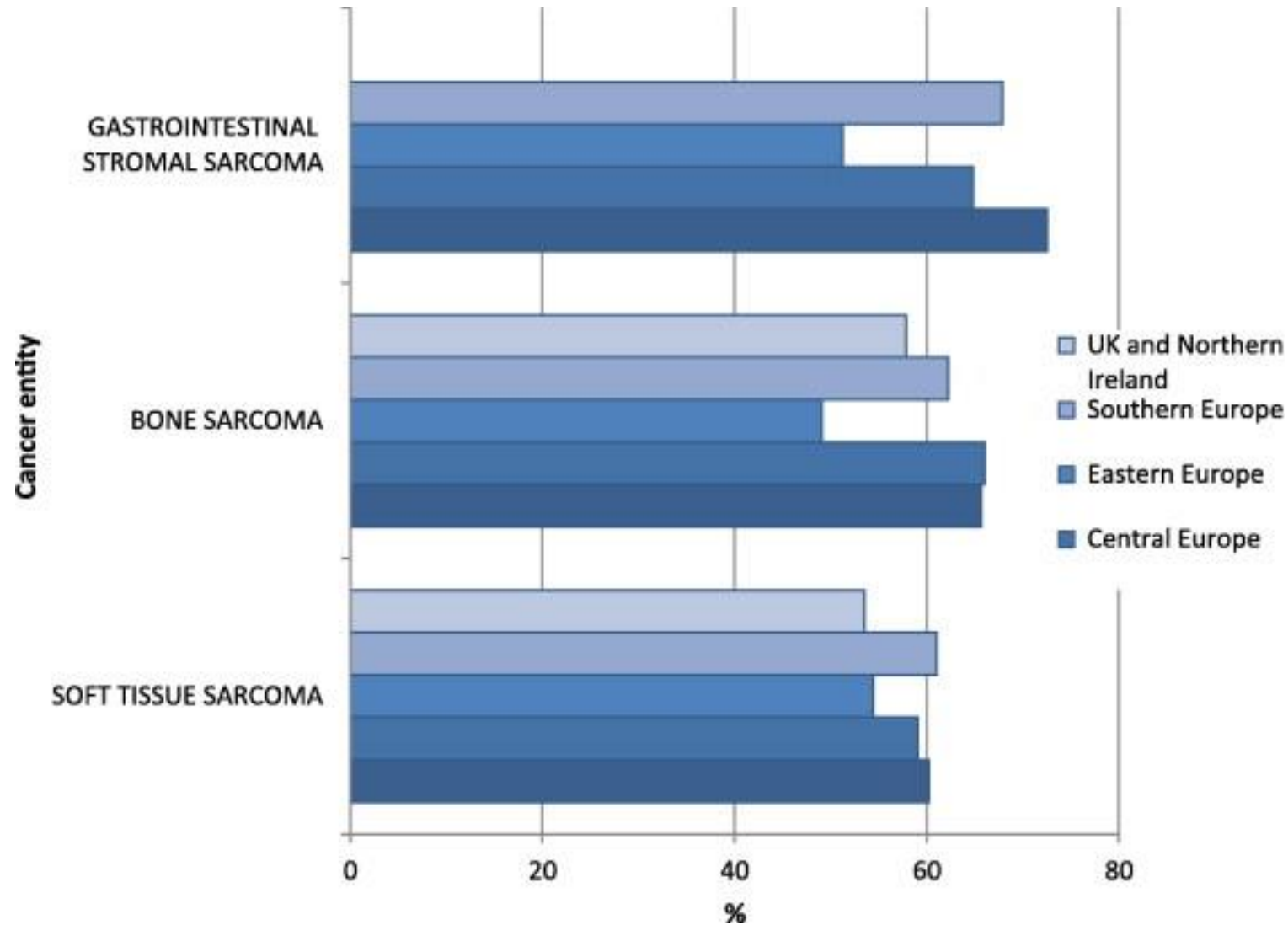
WP7

- Tool for check the Quality items in the sarcoma management
- Tool for improving over time
- Tool for supporting referral policies
- Tool for Network, Country and Institution data analysis

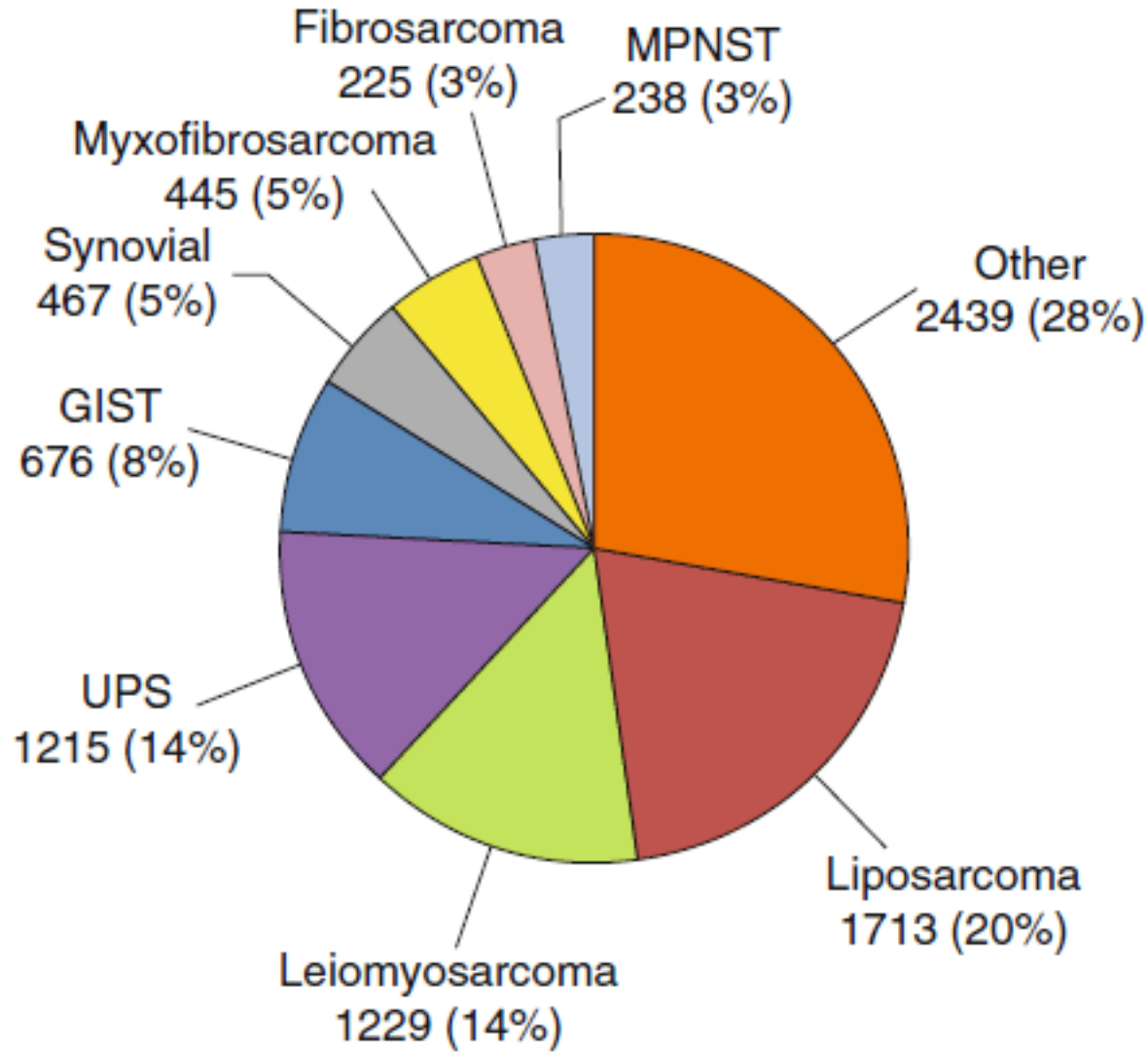
Lead contributor	P10 -GEIS
Other contributors	P1 – IIS-FJD P2 – INT P3 – IOR P4 – CLB P5 – INCAN P6 – AAC P7 – IAF P8 – FUNDAEVI P9 – INE

Due date	30 September 2023
Delivery date	30 September 2023
Deliverable type	R ¹
Dissemination level	PU ²

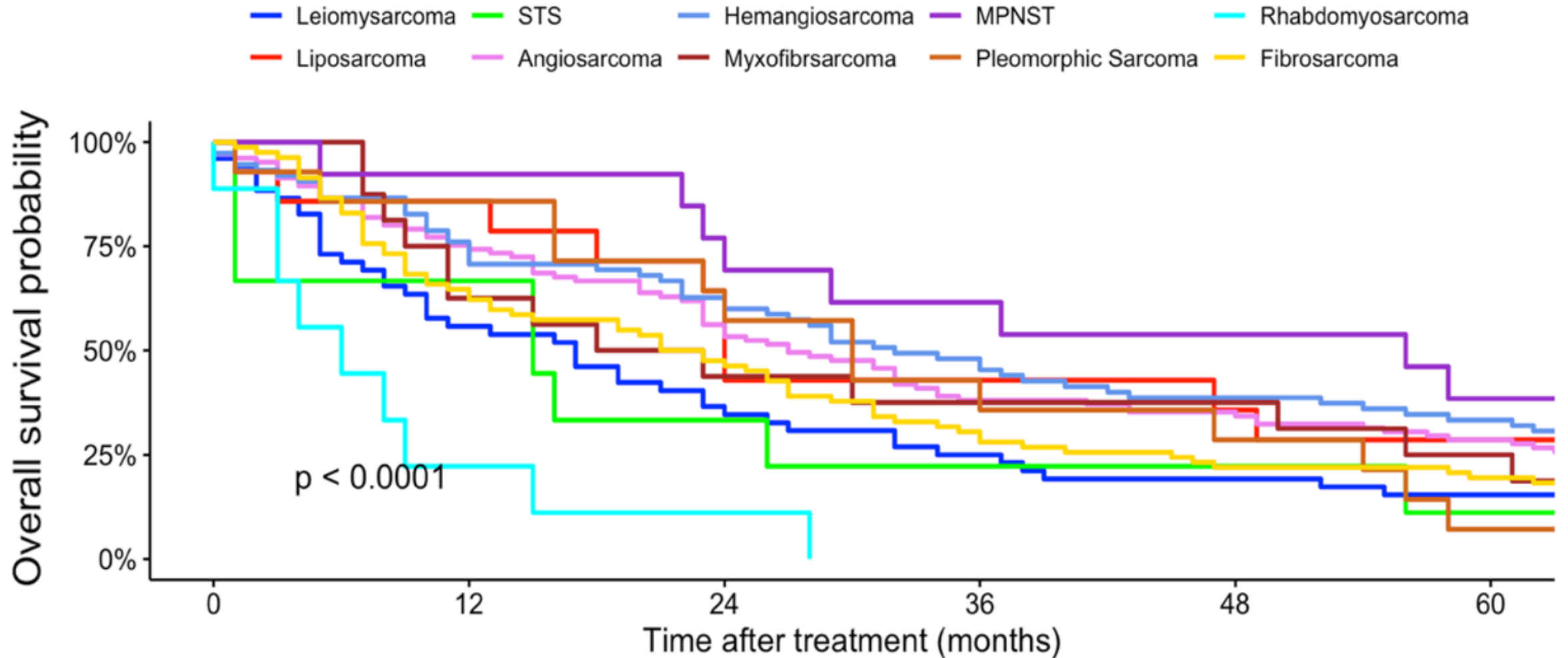
WP 6 & 7 The main aim: Observational study



WP 6 & 7 The main aim: Observational study



WP 6 & 7 The main aim: Observational study



➤ BLOCKS SENT

- 1049 Blocks sent for pathological peer review and translational projects

COUNTRY	N
Perú	229
Argentina	91
Brasil	191
Costa Rica	22
Paraguay	109
Italia	154
España	85
Bolivia	81
Colombia	13
Chile	6
Francia	68

CPG during Pandemic

► *Oncologist*. 2020 Oct;25(10):e1562-e1573. doi: 10.1634/theoncologist.2020-0516.

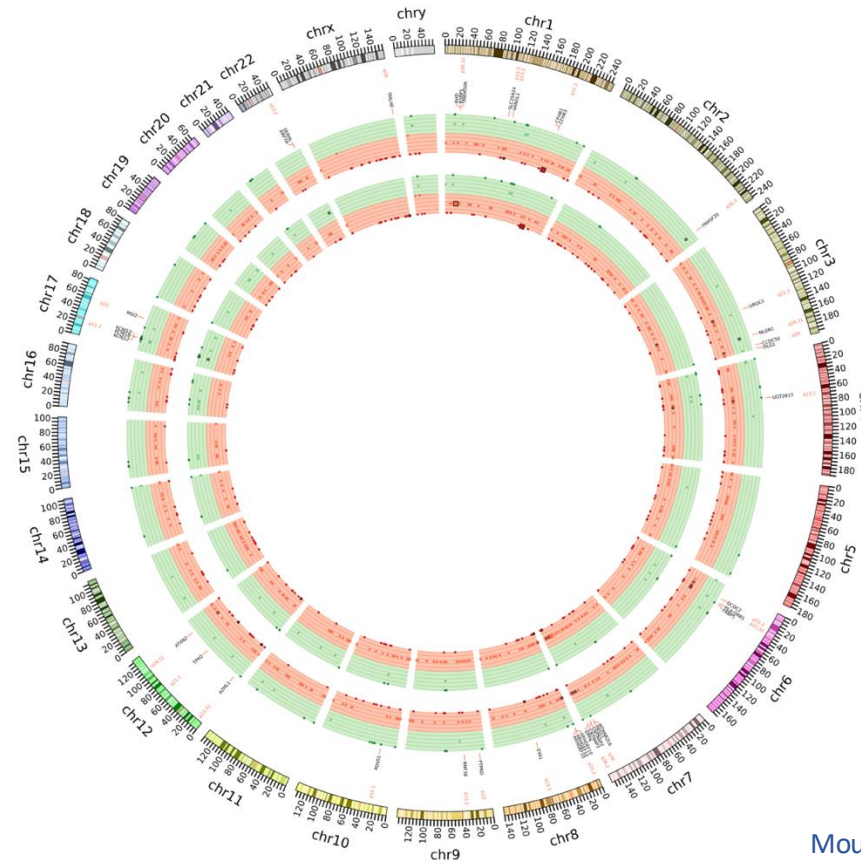
Epub 2020 Sep 23.

Sarcoma European and Latin American Network (SELNET) Recommendations on Prioritization in Sarcoma Care During the COVID-19 Pandemic

Javier Martin-Broto^{1 2}, Nadia Hindi^{1 2}, Samuel Aguiar Jr³, Ronald Badilla-González⁴, Victor Castro-Oliden⁵, Matias Chacón⁶, Raquel Correa-Generoso⁷, Enrique de Álava^{8 9 10}, Davide María Donati¹¹, Mikael Eriksson¹², Martin Falla-Jimenez¹³, Gisela German¹⁴, Maria Leticia Gobo Silva¹⁵, Francois Gouin¹⁶, Alessandro Gronchi¹⁷, Juan Carlos Haro-Varas¹⁸, Natalia Jiménez-Brenes¹⁸, Bernd Kasper¹⁹, Celso Abdon Lopes de Mello²⁰, Robert Maki²¹, Paula Martínez-Delgado¹, Hector Martínez-Said²², Jorge Luis Martinez-Tlahuel²³, Jose Manuel Morales-Pérez²⁴, Francisco Cristobal Muñoz-Casares²⁵, Suely A Nakagawa²⁶, Eduardo Jose Ortiz-Cruz²⁷, Emanuela Palmerini²⁸, Shreyaskumar Patel²⁹, David S Moura¹, Silvia Stacchiotti³⁰, Marie Pierre Sunyach³¹, Claudia M Valverde³², Federico Waisberg⁶, Jean-Yves Blay³³

Shared germline genomic variants in two patients with double primary gastrointestinal stromal tumours (GISTs)

David S Moura,¹ Daniel López López ^{2,3} Davide di Lernia,¹ Marta Martin-Ruiz,¹ Maria Lopez-Alvarez,⁴ Rafael Ramos,⁵ Jose Merino,⁶ Joaquin Dopazo,^{2,3,4} Jose Lopez-Guerrero,⁷ Jose L Mondaza-Hernandez,¹ Pablo Romero,¹ Nadia Hindi,^{1,8,9} Jesus Garcia-Foncillas,^{1,8} Javier Martin-Broto ^{1,8,9}



Oncology Department, Fundacion Jimenez Diaz University Hospital, Autonomous University, Madrid (Spain)



Translational Oncology Laboratory



Phase-I Clinical Unit

